Approved for use through 1/31/2007, OMB 0651-0032
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/595,507			ing Date 15/2008	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
FOR			NUMBER F	LED NL	NUMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A		]	N/A		
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A		N/A		]	N/A		
EXAMINATION FEE (37 CFR 1 16(o), (p), or (q))			N/A		N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			mi	nus 20 = *		l	x \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 = *			1	X \$ =		1	X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE	If the specification and drawings exce- sheets of paper, the application size for is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereo 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.1									
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						]			]			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		]	TOTAL		
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SMALL E									OR		ER THAN ALL ENTITY	
AMENDMENT	08/31/2011	CLAIMS REMAININ AFTER AMENDME	- 1	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1 16())	* 16	Minus	20	= 0	]	X \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 1	Minus	···3	- 0	]	X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
ENDMENT		CLAIMS REMAINII AFTER AMENDME	NG R	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())	•	Minus		-	1	X \$ =		OR	x s =		
M	Independent (37 CFR 1 16(h))		Minus	***	-	]	X \$ =		OR	x s =		
Ī	Application Size Fee (37 CFR 1.16(s))					ı			l			
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** II	"If the religions Number Previously Paid For 'in YHIS SPACE is less than 20, enter '20'. "If the 'Highest Number Previously Paid For 'in YHIS SPACE is less than 20, enter '20'. "If the 'Highest Number Previously Paid For 'in YHIS SPACE is less than 3, enter '20'. "If the 'Highest Number Previously Paid For 'in YHIS SPACE is less than 3, enter '3'.  The 'Highest Number Previously Paid For 'in YHIS SPACE is less than 3, enter '3'.  The Highest Number Previously Paid For 'if YHIS SPACE is less than 3, enter '3'.  The Highest Number Previously Paid For 'if YHIS SPACE is less than 3, enter '3'.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPT To to proceed) an application of the completion of the completi ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.